

CAND Pay.gov Application for Refund (rev. 10/19)

UNITED STATES DISTRICT COURT  
NORTHERN DISTRICT OF CALIFORNIA

**APPLICATION FOR REFUND (USDC-CAND PAY.GOV)**

PAY.GOV TRANSACTION DETAILS

**IMPORTANT:**

- Complete all required fields (shown in **red\***); otherwise, your request may be denied and require resubmission.
- In fields **3-6**, enter the information for the **incorrect** transaction (the one for which you are requesting a refund), not the **correct** transaction that appears on the docket. This information can be found in the Pay.gov screen receipt or confirmation email.

|   |  |
|---|--|
| <b>1. Your Name:*</b> Victoria Python   | <b>7. Your Phone Number:</b> (415) 436-9333  |
| <b>2. Your Email Address: *</b> victoria@eff.org  | <b>8. Full Case Number (if applicable):</b> 3:23-mc-80005-AGT  |
| <b>3. Receipt Number:*</b> ACANDC-17874191  | <b>9. Fee Type:*</b> <div style="margin-top: 10px;"> <input type="checkbox"/> Attorney Admission<br/> <input checked="" type="checkbox"/> Civil Case Filing<br/> <input type="checkbox"/> FTR Audio Recording<br/> <input type="checkbox"/> Notice of Appeal<br/> <input type="checkbox"/> Pro Hac Vice<br/> <input type="checkbox"/> Writ of Habeas Corpus         </div> |
| <b>4. Transaction Date:*</b> 01/05/2023   |  |
| <b>5. Transaction Time:*</b> 06:11:59 ET  |  |
| <b>6. Transaction Amount (Amount to be refunded):*</b> \$49.00  |  |
| <b>10. Reason for Refund Request:*</b> Explain in detail what happened to cause duplicate charges or no fee required. <ul style="list-style-type: none"> <li>For a duplicate charge, provide the <b>correct</b> receipt number in this field.</li> <li>If you paid a filing fee in an abandoned case number, note that case number here (but e-file the refund request in the <b>open</b> case).</li> </ul> <p>We were charged \$49 (see receipt number in Field #3) to open this case, but received an error message and had to resubmit payment in order to open the case resulting in being billed twice for same event. See correct receipt number ACANDC-17874278 on 1/5/23 at 06:26:24 ET. Receipts for both charges of \$49 are attached. Kindly refund the duplicate charge. Thank you.</p> |  |

✓ **Efile this form using OTHER FILINGS → OTHER DOCUMENTS → APPLICATION FOR REFUND.**

View detailed instructions at: [cand.uscourts.gov/ecf/payments](https://cand.uscourts.gov/ecf/payments). For assistance, contact the ECF Help Desk at 1-866-638-7829 or [ecfhelpdesk@cand.uscourts.gov](mailto:ecfhelpdesk@cand.uscourts.gov) Monday -Friday 9:00 a.m.-4:00 p.m.

| FOR U.S. DISTRICT COURT USE ONLY   |  |
|--|--|
| <div style="display: flex; align-items: center;"> <div style="margin-right: 10px;"> <input checked="" type="checkbox"/> Approved<br/> <input type="checkbox"/> Denied<br/> <input type="checkbox"/> Denied — Resubmit amended application (see reason for denial)         </div> <div>           Refund request:         </div> </div> | <div style="border: 1px solid green; padding: 5px; background-color: #d4edda;"> <b>APPROVED</b><br/> <i>By Ana Banares at 4:53 pm, Jan 25, 2023</i> </div> |
| Approval/denial date: 1/25/2023  | Request approved/denied by:  |
| Pay.gov refund tracking ID refunded: 27316SVA  | Agency refund tracking ID number: 0971- ACANDC-17874191  |
| Date refund processed: 1/25/2023   | Refund processed by: JPN   |
| Reason for denial (if applicable):   |  |
| Referred for OSC date (if applicable):   |  |